PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/834,478			ling Date 13/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
	FOR	N	JMBER FII	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1 16(o), (p),		N/A		N/A		N/A			N/A		
TO (37	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		1	X \$ =		OR	X \$ =		
IND	EPENDENT CLAIM CFR 1.16(h))	is .	minus 3 = *				× s =		1	X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawings excee sheets of paper, the application size fe is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereol 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.1									
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.]	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) SN								L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	02/15/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(ii)	- 29	Minus	·· 41	= 0	1	x s =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	· 6	Minus	8	= 0]	X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
_		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
ä	Total (37 CFR 1,160))	*	Minus	**	=]	x \$ =		OR	x s =		
AMENDMENT	Independent (37 CFR 1.16(h))		Minus	***	-]	X \$ =		OR	X \$ =		
ΙÑ	Application Size Fee (37 CFR 1.16(s))					l			1			
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))					ı			OR			
	_						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For IN THIS SYACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to ring contents of information is equilible by a content of the information of the informat ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.